

September 16, 1999

**COST DISTRIBUTION REPORTS (CDR) ACCOUNTS AND TREATING SPECIALTY
CODES FOR HOMELESS VETERANS**

1. PURPOSE: The purpose of this Veterans Health Administration (VHA) Directive is to emphasize the use of existing Cost Distribution Report (CDR) accounts, Treating Specialty Codes, and Budget Object Codes (BOC) for the various Health Care for Homeless Veterans (HCHV) Program components, and add a new CDR account for the Domiciliary Care for Homeless Veterans (DCHV) Program.

2. BACKGROUND

a. VHA uses the following definition of homelessness as provided by the Stewart B. McKinney Assistance Act of 1987: "Homeless or homeless individual includes an individual who:

- (1) Lacks a fixed, regular and adequate nighttime residence; and
- (2) Has a primary nighttime residence that is:

(a) A supervised publicly- or privately-operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill);

(b) A institution that provides a temporary residence for persons intended to be institutionalized; or

(c) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings."

b. The Department of Veterans Affairs (VA) is the only Federal agency that provides direct care to our nation's homeless population, specifically to homeless veterans.

c. For more than a decade, VHA has developed, refined, monitored, and evaluated a national network of programs that offers a full continuum of care for homeless veterans. This includes:

- (1) Outreach;
- (2) Referral to medical and mental health treatment;
- (3) Case management;
- (4) Residential care in domiciliary care programs and in community-based programs supported through grants, per diem payments and contracts;
- (5) Assistance with income support; and

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(6) Assistance with permanent housing.

d. No single agency or organization can meet the complex needs of homeless veterans. VA expanded the range of services available to homeless veterans through alliances with other Federal agencies, veterans service organizations, state and local governments, and non-profit organizations. VA's most successful efforts involve partnerships with other service providers.

e. A considerable amount of resources has been dedicated to providing services to homeless veterans since the start of the program over 12 years ago. VA's Fiscal Year (FY) 2000 budget identifies \$50 million to increase services for homeless veterans. Such funds will be used to expand outreach, case management, and transitional housing for homeless veterans. Tracking and accountability of these new resources, as well as previously allocated funding, is crucial for continuation of the various programs involved.

3. POLICY: Each VA medical facility will use the proper CDR accounts and Treating Specialty Codes to accurately reflect the workload and resources utilized for the program as shown in Attachment A.

4. ACTION: VA facilities will review their homeless programs to ensure they are using the correct CDR accounts, Treating Specialty Codes, and Budget Object Codes as detailed in Attachment A. **NOTE:** *Facilities are not expected to have all programs nor use all CDR accounts.*

5. REFERENCES: None.

6. FOLLOW-UP RESPONSIBILITY: The Mental Health Strategic Healthcare Group (116E) is responsible for the contents of this Directive.

7. RESCISSIONS: This VHA Directive expires September 30, 2004.

S/ by Robyn Nishimi, Ph.D. for



Thomas L. Garthwaite, M.D.
Acting Under Secretary for Health

Attachment

DISTRIBUTION: CO: E-mailed 9/17/99
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ATTACHMENT A

CODES FOR COST DISTRIBUTION AND TREATING SPECIALTY
AND BUDGET OBJECT CODES

1. Cost Distribution Account (CDR) and Treating Specialty Code

a. **1513.00 Domiciliary Care for Homeless Veterans (DCHV) Program.** A DCHV Program providing treatment and rehabilitation for patients defined as homeless or at risk of homelessness in a designated number of Domiciliary beds. Only homeless services rendered by staff in specialized DCHV Programs actively enrolled in the national evaluation for DCHV programs managed through the Northeast Program Evaluation Center (NEPEC) should be posted to this account. The patient days will be included in CDR 1513.00 as domiciliary days. Patient Treatment Files (PTF) Treating Specialty Code 37 has been assigned to this program. **NOTE:** *This is a new account.*

b. **1714.00 Homeless Chronically Mentally Ill Compensated Work Therapy-Transitional Residence (HCMI CWT-TR) (28).**

c. **2312.00 Health Care for Homeless Veterans-Homeless Mentally Ill (HCHV-HMI).**

d. **2318.00 Department of Housing and Urban Development-VA Shared Housing (HUD/VASH).**

e. **2319.00 Community Outreach to Homeless Veterans.**

f. **3520.00 Contract Homeless Chronically Mentally Ill.**

g. **3522.00 Homeless Providers Grant and Per Diem Program Per Diem Payments.** **NOTE:** *This is a new account.*

2. Budget Object Codes (BOC)

a. Facilities will assure that BOC 4110 is used for any per diem payments under the Homeless Providers Grant and Per Diem Program. BOC 4120 is for recording the obligation of the actual grant to the provider and is restricted to Veterans Health Administration (VHA) Headquarters use only.

b. Definitions for these budget object codes are as follows:

(1) **4110 Grants, Subsidies, and Contributions.** BOC 4110 includes per diem payments to assist public, private, and non-profit entities providing services to homeless veterans under the authorization of Title 38 Code of Federal Regulations (CFR) 17.700-17.731. **NOTE:** *Limited to cost center 8344 and to be used only by those facilities receiving funding under the Homeless Providers Grant and Per Diem Program from VHA Headquarters.*

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(2) **4120 Grants - Homeless Veterans.** Grants to assist public, private, and non-profit entities develop services for homeless veterans under the authorization of Title 38 CFR 17.700-17.731. **NOTE:** *Limited to cost center 8344 and for VHA Headquarters use only.*